SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

### APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

JUN 0 1 2022

Bayfield Co. Planning and Zoning Agency

UN	10101	(ENIEKE
Date: 7-6	7-2022	-
Amount Paid:	\$175 6-24 5pc/USCAS	-22 TR)±TG

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CO	NSTRUCTI	ON <u>UNTIL</u>	ALL PERMITS	HAVE	BEEN ISSU	ED TO A	PPLICA	NT. C	Origina	l App	lication	MUS	ST be subi	mitted	FIL	L OUT I	N INK (	NO P	ENCIL)
TYPE OF PERMIT						□ SAI	NITARY	/ 🗆 PI	RIVY		ONDI	TION	AL USE	☐ SPECIA	L USE	□ B.	O.A. [	OTI	HFR
Owner's Name:	MICH	JAFL	4 5AV	Ar	+		ailing A		C- 4)			C	City/State/	Zip:				Telep	phone:
VAN)	4551					129		THER		AU	=	5	577111	VATEN, 1	NN	550	82	715	9902
Address of Proper 8932	o P	SARK	POINT	52	D		City	/State/Zi	p: ⁴\	77	1	(4)	7 2	784	1				Phone:
Contractor:	_			11	7 7	Co	ntracto	r Phone:			Plumb			( 0 1	•			Plum	ber Phone:
Authorized Agent:	(Person S	igning Appli	cation on beha	lf of O	wner(s))		ent Pho		2		Agent	Mailin	ng Address	(include Cit	y/State/	/Zip):		Writt	ten
SER	EN	Hor	CATA	,5	W.		15 - 38	774	- 1		PT	n/2	BOX	24 1, NI	54	184	Y	Auth	orization ched
PROJECT LOCATION	Lega	al Descrip	tion: (Use T	ax Sta	atement)		Tax	ID#	385	510			,						ng Ownership)
		1/4	Gov't Lot		Lot(s)	CSM 217		& Page	CSI	M Doc 211/2:	#	Lo	t(s) #	Block #	Subdi	vision:			5
0.1	-						1 12	1		7885	5		1						
Section 2	<u> </u>	wnship _	51 N, F	ange	<u>OF</u>	w		Town	01:	20	OVE	YL	-		Lot Siz	ze 3.	30	Ac 3	reage
a <b>4</b>		Property	/Land withi	n 300	) feet of F	iver S	troam	linal later			******	Church	:. f	CL l'		leve	ur Drane		
	Cre		dward side					continue		DI	stance	Struc	ture is tr	om Shorelir	ne : feet		ur Prope loodplai		Are Wetlands
Shoreland -	→ Is	Property	/Land withi	n 100	00 feet of	Lake, F	ond or	Flowage	e	Di	stance	Struc	ture is fr	om Shorelir			Zone?		Present?  Ves
								continue		_		3		JIII JIIOTEIII	feet		□ Yes ☑ No	-1	€ No
☐ Non-Shoreland	d																2 140		
Value at Time					and South														
Value at Time of Completion					e metri				15.0		otal #	of			hat Ty				Type of
* include	1	Projec	t		Project			roject		b	edroc	TOP BOWL		Sewer/S					Water
donated time & material				Ħ	of Stori	es	FOL	ındatioı	n		on prope	1 19		Is on t Will be		perty			on
& illaterial	□ Nev	v Constr	uction	П	1-Story	1.401.00	□ Ва	semen	+		1 1	Ly	D Man			prope	rtyr		property
					1-Story	+		350111011	-	51				nicipal/Cit w) Sanitar		cify Tyn	٥:		☐ City
ć	□ Add	lition/Al	teration		Loft	•	□ Fo	oundatio	on		₹ 2		HOYA	by Toll	y spe	спу тур	e.		₩Well
\$	□ Con	version		V	2-Story		¥ sı		4	H	3		Ĭ San	itary (Exis	ts) Spe	cify Typ	oe:		
				/	2 3tol y			ab					_ H	oldn 4	mik				
		ocate (exi	0 0,					100	-	100	<u> </u>			y (Pit) or				gallor	n)
		perty	255 UII				□ V <sub>4</sub>	Use ear Rou	nd		No	ne		table (w/se		ontract)			_
								ar Rou					☐ Nor		31				_
Eviation Standard																			
Proposed Const	truction	dition, alt	eration or bu	siness	s is being a	pplied	for)	Length					Width:				Height:	_	
Troposcu cons	truction	i. (Overa	ili dimension	15)				Length	1;				Width:				Height:	1	5'
Proposed U	Jse	1					Pro	posed S	tructu	ıre					C	imens	ions		Square Footage
			Principal	Stru	cture (fi	rst str	ucture	on pro	perty)	)					(	Х	)		Tootage
			Residenc	<b>e</b> (i.e	. cabin,	huntin	g shac	k, etc.)							(4		321		1740
☐ Residentia	l Use				ith Loft										(	Х	)		
				_	ith a Po										(	Х	)		
					ith (2 <sup>nd</sup> ) ith a De										(	Х	)		
_					rith (2 <sup>nd</sup> )										(	X	)		
Commerci	al Use				ith Atta		Sarage								1	X	)		
			Bunkhou						ıartoro	or		n = 0 .	fa a d	f:!!#!\	1		- 1	_	
														racilities)	1	X		_	
☐ Municipal	Hen		Mobile H Addition	/Alte	ration /	ynlain	)								(	X	)	-	
☐ Municipal	use		Accessor									_			1	X	,	-	
			Accessor			-		ation /	explair	1)					-(-	_ X	)		
		A	Special U		A 00. 900 D			0.000			it -	_ /	T1	***	,			+	
													1116		(	X	)	-	
			Condition Other: (e)												(	X	)	-	
A.													* * * * *			Х	)		
I (we) declare that this	application	(including a	ny accompanyin	z inforr	mation) has l	een exa	mined by	me (us) and	to the h	nest of r	ov (our) k	chowles	dge and holio	LT IN PENALT		mnleta !	(we) sales	wlod	that I (wa) are
result of Bayfield Cour	nty relying o	on this inforn	nation I (we) am	(we) a	im (are) prov	iding and	that it w	ill be relied	upon by	Bayfiel	d County	in dete	armining who	that to iccus a	normit 1	Lucal fronts		- L 1114	rear i
property at any reason	nable time f	or the purpo	se of inspection.	- 1	ang l		4	, ,,,,,,,,	γ			E	auli		-, ordinal	to na	•e access t	o lile ab	ove described

Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Date

(If there are Multiple Owners-listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent:

Address to send permit \_

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** (1) (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (5) Show: Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6) ED Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% (7) 35 HOME Dringhan

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Please complete (1) - (7) above (prior to continuing)

Description	Setback Measureme	nts		Description	Sett Measur		
Setback from the Centerline of Platted Road	780	Feet		Setback from the Lake (ordinary high-water mark)	345	Feet	
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek		Feet	
				Setback from the Bank or Bluff	284	Feet	
Setback from the <b>North</b> Lot Line	80	Feet					
Setback from the <b>South</b> Lot Line	81	Feet		Setback from Wetland		Feet	
Setback from the West Lot Line	322	Feet		20% Slope Area on the property	☐ Yes	□ No	
Setback from the East Lot Line	650	Feet		Elevation of Floodplain		Feet	
				,			
Setback to Septic Tank or Holding Tank		Feet		Setback to Well		Feet	
Setback to Drain Field	_	Feet					
Setback to Privy (Portable, Composting)		Feet					
Prior to the placement or construction of a structure within ten (10) for	at of the minimum required	l cothook t	he he	oundary line from which the setback must be measured must be visible from or	ne previously survey	ed corner to the	

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: 21	-685	# of bedrooms: 5	Sanitary Date: 6	17-2021	
Permit Denied (Date):	Reason for Denial:					
Permit #: 22 - 0167	Permit Date: 7 -	27-2022	3			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Record  Yes (Fused/Contigu	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes KNo☐ Yes KNo		Yes No	
Granted by Variance (B.O.A.)  ☐ Yes CNo Case #:		Previously Granted by  Yes No		e #:		
Was Parcel Legally Created Was Proposed Building Site Delineated  □ Yes ⋉No	STR		es Represented by Owner Was Property Surveyed			
Inspection Record: Everything looked good. Norm	ing out of	the ordinari	1	Zoning District Lakes Classification		
Date of Inspection: 7-18-2022	Inspected by: &M			Date of Re-Inspect	ion:	
Condition(s): Town, Committee or Board Conditions Atta This permit cannot be trans Department permit required. Show	sferred : f pri it term renta	perty is sol	d. Bayfield C	nree (3) bed to	oms.	
Signature of Inspector: Tuca Mulanar				Date of Approv	1-18-7022	
Hold For Sanitary:  Hold For TBA:	Hold For Affi	davit: 🗌	Hold For Fees: 🗌 🔃			

### TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 - Washburn, WI 54891

Phone - (715) 373-6138 Fax - (715) 373-0114

e-mail: zoning@bayfieldcounty.org

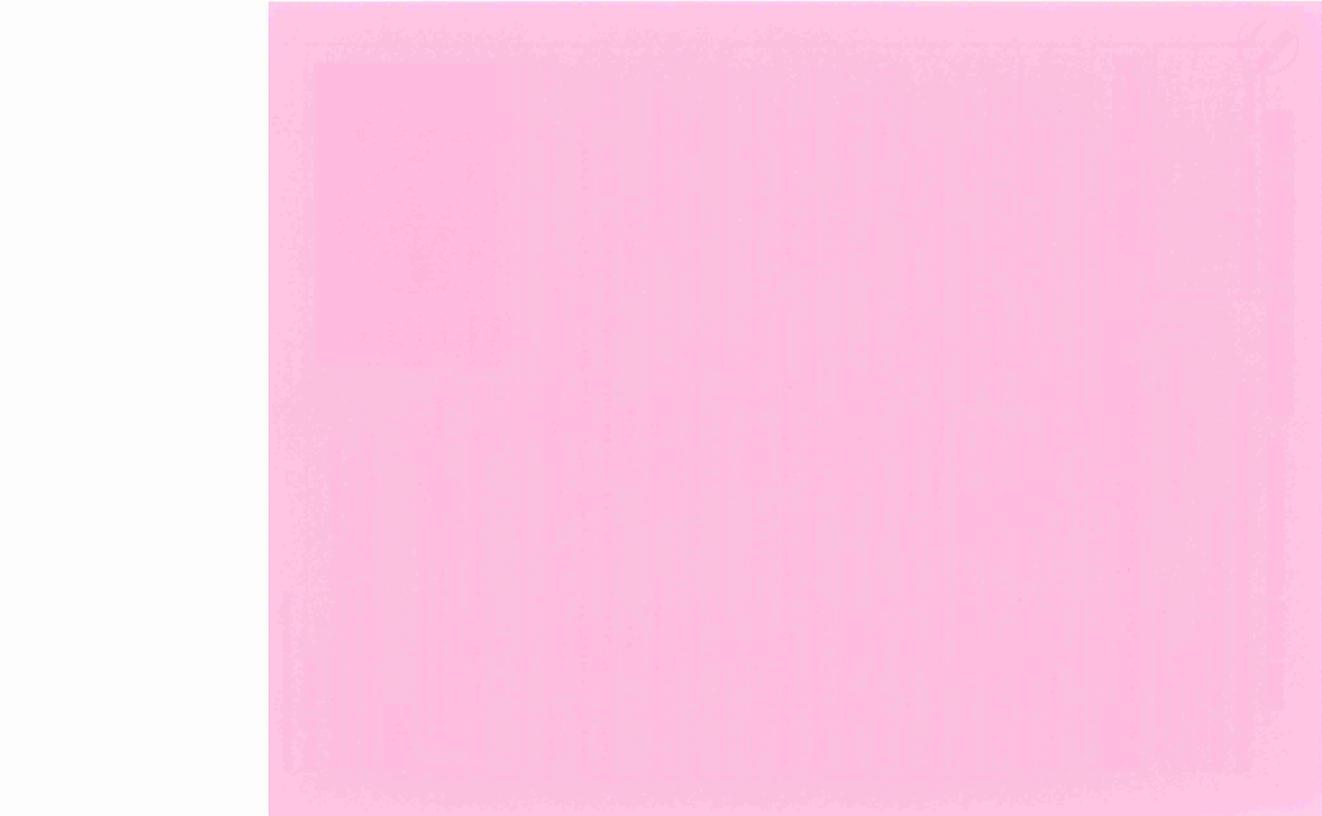
Website: www.bayfieldcounty.org/147 Date Zoning Received: (Stamp Here

RECEIVED

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

Property Owner MICHAELSSANA HVANASSE Property Address 89330 BANK POINT RP	Authorized Agent TENTN HUTCHINSON
HEILBSTEN WI 54844  Telephone 715 - 1088 - 990Z	
Accurate Legal Description involved in this request (specify  1/4 of 1/4, Section, Township,	only the property involved with this application)
	CSM# 2174
Additional Legal Description:	strict Lakes Classification
short term cental chiss	
We, the Town Board, TOWN OF	, do hereby recommend to
☐ Table ☐ Approv  Have you reviewed this for Compatibility with the Comp	al Disapproval
Township: (In detail clearly state Town Board's reason for r	ecommendation of tabling, approval or disapproval)
** THE FOLLOWING <u>MUST</u> BE INCLUDED WITH THIS FORM:	

Revised: November 2017



Town, City, Village, State or Federal **Permits May Also Be Required** 

LAND USE - X (Shoreland) SIGN -SPECIAL – A (Tn of Clover-6/8/2022) CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.

22-0167

Issued To:

Michael & Sarah Vanasse

Location:

 $\frac{1}{4}$  of

Section 26

Township **51** N. Range **7** 

W. Town of

Clover

Gov't Lot

Lot 1

Block

Subdivision

CSM# 2174

IN V.12 P.375 IN DOC 2021R-588873 TOG WITH EASE

Residential Use in R-RB zoning district

For: (1-Unit) Short Term Rental of existing 2-Story Residence (40' x 32') = 1760 sq. ft. Height 25'

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): To be rented as a 3-bedroom maximum residence. Contact County Health Department for permits. Town/State/DNR permits may be required. This permit cannot be transferred if property is sold.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Erica Meulemans, AZA

**Authorized Issuing Official** 

July 27, 2022

Date

# SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoning Depart

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

Address to send permit 85350

### APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

JUN 23 2022

Bayfield Co.
Planning and Zoning Agency

Permit #: 22.	0176	ENTE
Date: 7-6	28-2022	(
Amount Paid:	\$75778-0	022
Bes	Accy Blog All.	FIG
Other:		
Refund:		

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION  $\underline{\text{UNTIL ALL PERMITS HAVE BEEN ISSUED}}$  TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

YPE OF PERMIT F	REQUESTE	D +>	J LANE	USE 🗆	California County Co	The state of the s	□ C	ONDITIO			SPECIAL	USE 🗆	B.O.A. 🗆 C	THER	
Owner's Name:	h Sc	huh	te		83	Address: 350 Len /State/Zip:	owa	RJ	, c	ity/Stat	e/Zip: SHOV M	V. 34	1844	Telephone	:
	Beeksn	NC 9	Rd			rbetar i	Vi E	5484	1			· /		Cell Phone 651-333	
ontractor:					Contrac	tor Phone:		Plumber	:	T		*		Plumber Pl	none:
uthorized Agent:	(Person Sign	ing Applica	ation on behalf	fof	Agent P	hone:		Agent M	ailing Ad	ldress (i	nclude City	//State/Zip)	:	Written Au	thorization
vner(s))		i or this	Number fakti		Tax	ID#						Desemb	15	Required (	for Agent)
PROJECT .OCATION	egal Descr	iption:	(Use Tax Sta	tement)	1	ノワソフ		L					d Document: (S	nowing Own	ersnip)
<u>re</u> 1/4, <u>S</u> W	<u>V</u> 1/4	Gov	't Lot	Lot(s)	CSM \	/ol & Page	CSM Do	c#	Lot(s) #	#	Block #	Subdivisi	on:		
Section 21	_ , Townsh	ip <u>5</u> (	N, Ran	ge <u>7</u>	_ w	Town of:	ves					Lot Size 1320	1320	Acreage	
September 1	☐ Is Pro Creek o	perty/La r Landwa	and within 3 ard side of I	300 feet of Floodplain	River, Stre	eam (incl. Intermit		Distar	ice Struc	cture is	from Sho	oreline :	Is your Pro		re Wetlands
Shoreland –	ls Pro	perty/La	and within 1	.000 feet o	f Lake, Por If y	nd or Flowage	<b>→</b>	Distar	nce Struc	cture is	from Sho		Zone?	s	Present?  Ves No
( Non- horeland				1443	B. C		4.8	J.					2 100		
Value at Time of Completion						Estimate.		Tota	al # of			What T	ype of		Type of
* include donated time		Project Project Project # of Stories Foundation							rooms		ls.	on the p	Sanitary System(s) the property or		
& material	New	Constri	uction	1-St	orv	☐ Baseme	ent	pro	perty		Will Iunicipal		e property?		property  ☐ City
10-000	□ Addi	tion/Al	teration	□ 1-Stony + □ (New								ecify Type:	· ·	□ Well	
10-00	□ Conv	ersion	sion   2-Story   Slab						□ S	anitary (	<b>Exists)</b> Sp	ecify Type:		NA	
			sting bldg)										aulted (min 2	200 gallon)	]
	☐ Run a		ess on			Use ☐ Year Ro	und		None	_	ortable ( ompost	w/service	contract)		
								7.00		₩ N		Tonet			, '
xisting Structu	ıre: (if add	lition, alt	eration or bu	ısiness is be	ing applied	for) Leng	th: 3	6		Width	1: 19	31	Heigh	nt: 18.6	
roposed Cons	truction:	(overa	ıll dimensio	ns)	3 - 1 - 1	Leng	_			Width	-		Heigh		,
Proposed I	Use	1	K 5 162		yer it sie	Proposed	Structi	ıre					Dimensions	All the second s	Square Footage
						ructure on pr						(	Х	)	
			Residenc	ce (i.e. cat with L		ng shack, etc.	.)					(	X	)	
Residentia	al Use	777			Porch						-		X	)	1
				with (	2 <sup>nd</sup> ) Porcl	h						1	X	)	
				with a	Deck							(	Х	)	
Commerci	al Use			with (	2 <sup>nd</sup> ) Deck						n	(	Х	)	
,				with A	Attached	Garage	50	ť				(	X	) 1	
			Bunkhou	ıse w/ (□	sanitary, <u>c</u>	or sleeping	quarters	, <u>or</u> 🗆 co	oking &	food p	ep faciliti	es) (	> X	)	
				lome (ma				7 7 90				_ (	Х	)	
Municipal	Use			/Alteration				1.14			_	_ (	Х	)	
		Ł				Leon 7			sting	90	no go	( )	12 X 36	) 4	72
		Y	Accessor	y Buildin	g Additio	n/Alteration	(explair	n) <u>On</u>	Both	sid	et /		achx Side		Each
			Special U	Jse: (expla	in)							. (	х	)	
			Conditio	nal Use: (								(	Х	)	
100			Other: (e									(	Х	)	Da -
			FAILURE TO	OBTAIN A	PERMIT or S	TARTING CONSTR	RUCTION	WITHOUT	A PERMIT	T WILL RE	SULT IN PE	NALTIES	v.h ',	- والقوضا	Page 1
I (we) declare that thi	s application (	including a	ny accompanyir	ng information	) has been exa	amined by me (us) a	and to the b	est of my (c	ur) knowle	dge and h	elief it is true	correct and	complete. I (we) ac	knowledge tha	it I (we) am
(are) responsible for t result of Bayfield Cou	ne detail and and inty relying or	accuracy of this inforn	f all information mation I (we) an	ı I (we) am (are n (are) providi	e) providing ar	nd that it will be relie	ied upon by	Bayfield Co	unty in det	ermining	whether to is	sue a nermit	I (wa) further acco	nt linbility which	h manu ha a
property at any reaso	nable time for	the purpo:	se of inspection	1	1							,, orull	to mave acce	23 to the above	- described
Owner(s):	Man	//_	XXXII.	4	(6)	zedita.	J. Die	NV	20 J F	ahi J	100	D	ate		
(If there are Mu	Itiple Owne	ers listed	on the Deed	All Owners	must sign	or letter(s) of au	uthorizat	ion must a	ccompa	ny this a	polication	)			-

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Lonavee Rd

**Attach** 

Copy of Tax Statement

Date

(See Note below)

### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of: **Proposed Construction** 

(2)Show / Indicate: North (N) on Plot Plan

Fill Out in Ink – NO PENCIL

(4)Show:

Show:

(5)

(6)

277.74

(3)Show Location of (\*):

Show any (\*):

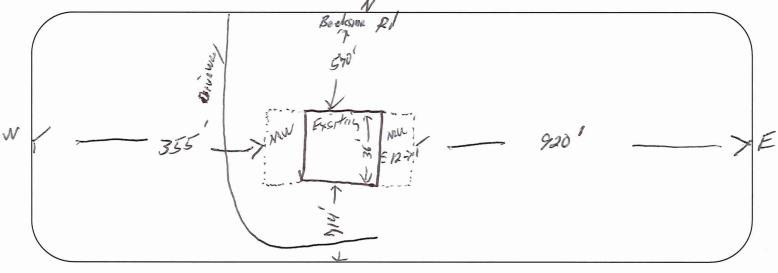
(\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

5

(\*) Wetlands; or (\*) Slopes over 20% (7)Show any (\*):



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Setback Measuremen	nts		Description		
		aude is			
	Feet		Setback from the Lake (ordinary high-water mark)		Feet
570'	Feet	N.	Setback from the River, Stream, Creek		Feet
			Setback from the Bank or Bluff		Feet
570	Feet				
714'	Feet		Setback from Wetland		Feet
3 50 /	Feet		20% Slope Area on the property	☐ Yes	<b>№</b> No
920'	Feet	1	Elevation of <b>Floodplain</b>		Feet
	Feet		Setback to Well		Feet
	Feet				1 (2), 34, (94), 24
	Feet				
	570 / 570 / 7/4 / 3 50 /	Measurements  Feet  570 Feet  570 Feet  714 Feet 3 50 Feet 9 20 Feet Feet Feet	Measurements  Feet  570 Feet  714 Feet 3 50 Feet 9 20 Feet Feet Feet	Description	Measurements   Description   Measurements

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense

### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

		740 1800 230 240								
Issuance Information (Count	y Use Only)	Sanitary Number:	*	# of bedrooms:	Sanitary Date:					
Permit Denied (Date):		Reason for Denial:								
Permit #: 22-0176		Permit Date: 7-	28-2022							
Is Parcel in Common Ownership	Yes (Deed of Record) Yes (Fused/Contiguor Yes	us Lot(s)) KNo	Mitigation Required Mitigation Attached	☐ Yes ♥ No ☐ Yes ♥ No	Affidavit Required Affidavit Attached ☐ Yes ☐ No ☐ Yes ☐ No					
Granted by Variance (B.O.A.)  ☐ Yes KNo Case #:  Previously Granted by Variance (B.O.A.)  ☐ Yes KNo Case #:										
Was Parcel Legally Created Was Proposed Building Site Delineated Was Proposed Building Site Delineated No Were Property Lines Represented by Owner Was Property Surveyed Yes										
Inspection Record:  Over many Started					Zoning District ( A - \ ) Lakes Classification ( )					
Date of Inspection: 7-70-707	77	Inspected by:			Date of Re-Inspection:					
Condition(s): Town, Committee or Bo To neet all set to No plumbing permit	backs, inclu Hed. Town/s	ding caves co	and overhand	ched.) gs. For Person neded.						
Signature of Inspector: Tuccu	Muleman	1			Date of Approval: 7-70-7007					
Hold For Sanitary:	Hold For TBA:	Hold For Affid	avit: 🗆 H	Hold For Fees: 🗆						

®®January 2000 (®August 2021)

Field Inve	estigation
Date: 7-19-72	Arrive: 8:55 Depart: 9:05
Landowner. Schultz, Randolph	Photos taken: No
Project Location: 15245 Beeksma Rd	Persons Present GA
Waterway:	Purpose of visit
PlN#*Attach Real Estate Inquiry* Paid \$ Receipt #	ZP Onsite SAP Sanifary Wetland Delineation Hoodplain OHWM Boathouse Complaint Averaging Walkout
	Other:
	ywage noise
West 34	x 30 x 10 x 1

-

, .

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0	176		Issued	To: Ra	ındolp	oh Schultz							
Location:				<b>V</b> 1⁄4	Section	21	Township	50	N.	Range	7	W.	Town of	Clover
Gov't Lot			Lot	55	Blo	ck	Suk	odivisio	n	-			CSM#	

**Residential Structure in Ag-1 zoning district** 

For: Accessory Add/Alt: [ 1- Story ]; Garage Lean-to (West Side) (12' x 36'); Garage Lean-to (East Side) (12' x 36')= 864 sq. ft. ] Height of 18'6"

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not for Human Habitation or Sleeping Purposes. If Pressurized water enters structure a sanitary permit is required prior. Must meet and maintain setbacks including eaves and overhangs. For personal storage only. Town/State/DNR permits may be required.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that yields the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

### Erica Meulemans, AZA

Authorized Issuing Official

July 28, 2022

Date

### SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

### APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**



Bayfield Co.

Permit #: 22	-01	175	- (	EN	ER
Date: 7-2	28-	202	22	7	
Amount Paid:	出方	7-18 Blog	-20	22 T/+	
Other:					
Refund:					

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CO				Departmen		O APPLICANT.	Origi	nal Apr	lication N	/IUST be	ubmitt	ed F	ILL OUT II	N INK	NO PE	NCII.)
TYPE OF PERMIT F	REQUESTE	D -	V LAND	O USE	SANITA	ARY   PRI										110111
Owner's Name:	LOCESTE	^	LAIVE	J 03E		ng Address:	VY 🗆	CONDI	TIONAL US	ity/State/Z	ECIAL U	SE U	B.O.A.	OTH	ER ephone:	
Rand	a lah	Sc	hultz	2		and the second	Lena	ivee .	n 111	Herbs	2	15.	54844		ephone.	
Address of Propert	•	/	0 1	1		ity/State/Zip:		,				, .	2101		l Di	
Email: (print clear		heme	r Ru	4 -		Herbak	v t	$\nu_i$	5484	14					I Phone:	3-0124
Email: (print clear	iy)	VS	chul	HZ 6	(a)	Gmoil	. Co.	m							7 30	,
Contractor:						actor Phone:		Plum	oer:					Plu	mber Ph	ione:
Authorized Agent:	(Person Sign	ing Applic	ation on behalf	f of	Agent	t Phone:	06.75	Agent	: Mailing Ac	dress (incl	ida City/	State /7ir	1).	-		
Owner(s))								Agent	. Ividiling Ac	iui ess (inicit	ide City/.	state/2ip	)):			horization or Agent)
PROJECT LOCATION	egal Descr	iption:	(Use Tax Sta	tement)	I I	ax ID#	747					Recorde	ed Documer	nt: (Show	ing Owne	ership)
NE 1/4, SW	1/4	Gov	/'t Lot	Lot(s)	CSM	Vol & Page	CSM D	oc#	Lot(s)	# Blo	ock #	Subdivi	sion:			
Section 21	_ , Townsh	ip <u> </u>	N, Ran	ge 7	_ w	Town o	f: Clov	201				Lot Size	11320	9	Acreage	's
	☐ Is Pro	pertv/L	and within 3	300 feet of	River St	tream (incl. Inte			tance Stru	cturo ic fr	m Char			Propert	70	
Charaland	Creek o	r Landw	ard side of I	Floodplain?		f yescontinu			tance Stru	cture is in	JIII SHOP	feet	in Flo	odplain	- Δ	re Wetlands Present?
☐ Shoreland =	ls Pro	perty/La	and within 1	.000 feet of		ond or Flowag	_	Dis	tance Stru	cture is fro	om Shor	eline : feet		one? Yes		☐ Yes
Non-		7 4							1 3 10			eet		No		7 110
Shoreland								1	ja							£
Value at Time								т	otal # of			What '	Гуре of			Type of
of Completion * include		Projec	+	Pro	ject	Proje	ect	AURIO IS	edrooms		Sewe		ary Syster	n(s)		Water
donated time		riojec		# of S	tories	Founda	ation		on		ls o	n the p	roperty o	<mark>or</mark>		on
& material	New Construction 1-Story   Basement   1   Mur										property					
New Construction 1-Sto					rv+					☐ Municipal/City ☐ Ci ☐ (New) Sanitary Specify Type: ☐ ☐					☐ City	
\$ 20.000					☐ Found	dation		2							□ Well	
-	☐ Conv	ersion		□ 2-Sto	ory	□ Slab		C	3	☐ Sani	tary (Ex	(Exists) Specify Type:				NA
			isting bldg)							☐ Priv	y (Pit)	or 🗆 '	Vaulted (n	nin 200 į	gallon)	
☐ Relocate (existing bldg) ☐ ☐ ☐ ☐ ☐ Privy (Pit) or ☐ Vaulte☐ ☐ ☐ ☐ ☐ ☐ Privy (Pit) or ☐ Vaulte☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐																
			ess on				The second	1	None	1			contract)			
	Prop		ess on			☐ Year I	The second	1	None	□ Con	post To		contract)			
	Propo	erty				□ Year I	The second	A	None	1	post To		contract)			
Existing Structu	Propo	erty lition, alt	eration or bu	isiness is be	ing appli	□ Year I	The second	40	None	□ Con	post To	ilet	,	eight:	18	5
Existing Structu Proposed Cons	Propo	erty lition, alt	eration or bu	usiness is be	ing appli	Year I	Round		None	☐ Com	post To	ilet	H	eight:	18	
Existing Structu Proposed Cons Proposed I	Propo	erty lition, alt	eration or bu	usiness is be	ing appli	Year I	Round	40	None	□ Com Non Width:	post To	ilet	H	eight:		Square
Proposed Cons	Propo	lition, alt	eration or bu	ns)		Year I	ngth: ngth:	40 ture	None	□ Com Non Width:	post To	ilet	H	eight:		
Proposed Cons	Propo	(overa	eration or bu all dimension Principal	ns) Structure	e (first:	ed for) Lei	ngth: ngth: ed Struc	40 ture	None	□ Com Non Width:	post To	ilet	H H Dimensio	eight:		Square
Proposed Cons	Proposition:	erty ition, alt	eration or bu all dimension Principal	Structure ce (i.e. cab with L	e (first : oin, hun	ed for) Ler Propose structure on	ngth: ngth: ed Struc	40 ture	None	□ Com Non Width:	post To	ilet	Dimension X	eight:		Square
Proposed Cons	Proposition:	erty ition, alt	eration or bu all dimension Principal	Structure ce (i.e. cab with L with a	e (first : bin, hun oft Porch	ed for) Ler Propose structure on ting shack, e	ngth: ngth: ed Struc	40 ture	None	□ Com Non Width:	post To	ilet	Dimensio X	eight:		Square
Proposed Cons	Proposition:	erty ition, alt	eration or bu all dimension Principal	Structure ce (i.e. cab with L with a with (2	e (first soin, hun oft Porch 2 <sup>nd</sup> ) Por	ed for) Ler Propose structure on ting shack, e	ngth: ngth: ed Struc	40 ture	None	□ Com Non Width:	post To	ilet	Dimension X	eight:		Square
Proposed Cons	Proposition:	erty ition, alt	eration or bu all dimension Principal	Structure Ee (i.e. cab with L with a with (2	e (first soin, hun oft Porch 2 <sup>nd</sup> ) Por Deck	ed for) Let Propose structure on ting shack, e	ngth: ngth: ed Struc	40 ture	None	□ Com Non Width:	post To	ilet	Dimension X X X X X X X X X X X X X X X X X X X	eight:		Square
Proposed Cons	Proposition:  Use	erty ition, alt	eration or bu all dimension Principal	Structure ce (i.e. cab with L with a with (2	e (first soin, hun oft Porch 2 <sup>nd</sup> ) Por Deck 2 <sup>nd</sup> ) Dec	Propose structure on ting shack, e	ngth: ngth: ed Struc	40 ture	None	□ Com Non Width:	post To	ilet	Dimension X X X X X X X X X X X X X X X X X X X	eight:		Square
Proposed Cons  Proposed I	Proposition:  Use	erty (overa	Principal Residence	Structure ce (i.e. cab with L with a with (2 with A	e (first : pin, hun oft Porch 2 <sup>nd</sup> ) Por Deck 2 <sup>nd</sup> ) Dec	Propose structure on ting shack, e	ngth: ngth: ed Struc propert	40 ture		Width:	npost Toe	( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:		Square
Proposed Cons  Proposed I	Proposition:  Use	erty ition, alt	Principal Residence	Structure Ce (i.e. cab with L with a with (2 with a with (3 with A	e (first soin, hun oft Porch 2nd) Por Deck 2nd) Deck ttached	Propose structure on ting shack, e  ck d Garage	ngth: ngth: ed Struc propert ttc.)	y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:		Square
Proposed Cons  Proposed I	Proposition:  Use	ition, alt	Principal Residence Bunkhou Mobile H	Structure ce (i.e. cab with L with a with (2 with a with (3) with A lise w/ (   5	e (first : pin, hun oft Porch 2 <sup>nd</sup> ) Por Deck 2 <sup>nd</sup> ) Dec attached sanitary, pufactur	Propose structure on ting shack, e  ck d Garage or   sleepined date)	ngth: ngth: ed Struc propert ttc.)	y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:		Square
Proposed Cons  Proposed I	Proposition:  Use  al Use	ition, alt	Principal Residence Bunkhou Mobile H	Structure ce (i.e. cab with L with a with (2 with a with A see w/ ( see w/ ( see w/ A	e (first soin, hun oft Porch 2nd) Por Deck 2nd) Deck attached sanitary, nufacture (explains the control of the	Propose structure on ting shack, e  ck d Garage or   sleepined date)	ngth: ngth: ed Struc propert ttc.)	ture y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:		Square
Proposed Cons  Proposed I  Residentia	Proposition:  Use  al Use	ition, alt	Principal Residence Bunkhou Mobile H	Structure ce (i.e. cab with L with a with (2 with a with A see w/ ( see w/ ( see w/ A	e (first soin, hun oft Porch 2nd) Por Deck 2nd) Deck attached sanitary, nufacture (explains the control of the	Propose structure on ting shack, e  ck d Garage or   sleepined date)	ngth: ngth: ed Struc propert ttc.)	ture y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:  ) ) ) ) ) ) ) ) ) ) ) ) ) )	F	Square
Proposed Cons  Proposed I  Residentia	Proposition:  Use  al Use	ition, alt	Principal Residence  Bunkhou Mobile H Addition Accessor	Structure ce (i.e. cab with L with a with (2 with A lise w/ (   s lome (mar /Alteratio ry Building	e (first : pin, hun oft Porch 2nd) Por Deck 2nd) Dec stached sanitary, nufacturi on (explai	Propose structure on ting shack, e  ch  ck d Garage or   sleepined date) ain) n) Garage con/Alteration	ngth: ngth: ed Struc propert ttc.)	ture y)  rs, or	cooking &	Width: Width:	npost Toe	( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:  ) ) ) ) ) ) ) ) ) ) ) ) ) )	F	Square
Proposed Cons  Proposed I  Residentia	Proposition:  Use  al Use	ition, alt	Principal Residence  Bunkhou Mobile H Addition Accessor Special U	Structure te (i.e. cab with L with a with (2 with A lise w/ (   s dome (mar /Alteratio ry Building y Building	e (first : pin, hun oft Porch 2nd) Por Deck 2nd) Deck strached sanitary, nufacture on (explai g Additi n)	Propose structure on ting shack, e  ck d Garage or   sleepined date)   sin)   Caston Alteration	ngth: ngth: ed Struc propert etc.)	youture y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:  ) ) ) ) ) ) ) ) ) ) ) ) ) )	F	Square
Proposed Cons Proposed I  Residentia  Commerci  Municipal	Proposition:  Use  al Use	ition, alt	Principal Residence Bunkhou Mobile H Addition Accessor Accessor Special U	Structure ce (i.e. cab with L with a with (2 with A see w/ (1 s dome (man /Alteratio ry Building y Building lse: (explai nal Use: (e	e (first : pin, hun oft Porch 2nd) Por Deck 2nd) Deck strached sanitary, nufacture on (explai g Additi n)	Propose structure on ting shack, e  ch  ck d Garage or   sleepined date) ain) n) Garage con/Alteration	ngth: ngth: ed Struc propert etc.)	youture y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:  ) ) ) ) ) ) ) ) ) ) ) ) ) )	F	Square
Proposed Cons  Proposed I  Residentia	Proposition:  Use  al Use	ition, alt	Principal Residence  Bunkhou Mobile H Addition Accessor Special U	Structure ce (i.e. cab with L with a with (2 with A see w/ (1 s dome (man /Alteratio ry Building y Building lse: (explai nal Use: (e	e (first : pin, hun oft Porch 2nd) Por Deck 2nd) Deck strached sanitary, nufacture on (explai g Additi n)	Propose structure on ting shack, e  ck d Garage or   sleepined date)   sin)   Caston Alteration	ngth: ngth: ed Struc propert etc.)	youture y)	cooking &	Width: Width:	npost Toe	( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:  ) ) ) ) ) ) ) ) ) ) ) ) ) )	F	Square
Proposed Cons Proposed I Residentia Commerci Municipal	Proposition:  Use  al Use  Use	erty (overa	Bunkhou Mobile H Addition Accessor Special U Condition Other: (e	Structure ce (i.e. cab with L with a with (2 with A lise w/ (   s lome (mar /Alteratio ry Building lse: (explai nal Use: (e xplain)	e (first : pin, hun oft Porch 2nd) Por Deck 2nd) Dec attached sanitary, nufactur on (explai g (explai g) Additi n) explain)	Propose structure on ting shack, e  ch  ck d Garage or   sleepined date) ain) n)	ngth: ngth: ed Struc propert ttc.)	ture y)	cooking &	Width: Width:	facilities	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:  ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	F	Square cootage
Proposed Cons Proposed I Residentia  Commerci Municipal  I (we) declare that this (are) responsible for the constant of the co	Proposition:  Use  If add truction:  Use  If all Use  Use	including a	Bunkhou Mobile H Addition Accessor Special U Condition Other: (e	Structure ce (i.e. cab with L with a with (2 with A lise w/ (   s lidome (mar /Alteratio ry Building ry Building lise: (explai nal Use: (e xplain)	e (first : pin, hun oft Porch 2nd) Por Deck 2nd) Dec attached sanitary, nufactur on (explai g Additi n) explain)	Propose structure on ting shack, e  ck d Garage ed date) ain) on/Alteration  STARTING CON- examined by me (and that it will be and that it will be an and that it will be and that it will be an another than anot	ngth: ngth: ed Struc propert ttc.)  ng quarte  reg quarte  regist upon (explaint)	youture  y)  rs, or   Lin)  N WITHO  The best of field to be startful to the s	cooking &	Width:  Width:  Food prep	facilities  TIN PEN it is true, c	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Dimension X X X X X X X X X X X X X X X X X X X	eight:	F F	Square cootage
Proposed Cons  Proposed I  Residentia  Commerci  Municipal  I (we) declare that this (are) responsible for tresult of Bayfield Cou	Proposition:  Use  If add truction:  Use  If all Use  If all Use  If all Use  If all Use	including a accuracy or this inform	Bunkhou Mobile H Addition Accessor Special U Condition Other: (e.	Structure  ize (i.e. cab  with L  with a  with (2  with A  see w/ ( see w/ case)  Alteration  y Building  y Building  see: (explain  anal Use: (explain  company of the with a  company	e (first spin, hun oft Porch 2nd) Por Deck 2nd) Deck 2nd) Deck 2ttached sanitary, nufacturion (explain g Addition) explain)	Propose structure on ting shack, e  ch  ck d Garage ed date) ain) n) Com/Alteration stanting by me (u and that it will be in this application. I	ngth: ngth: ed Struc propert ttc.)  struction solution (explain)	ture  y)  rs, or   iin)  N WITHO  B best of m  by Bayfield  nt to count	cooking &  UT A PERMIT  Y (our) knowle ( County in det y officials char	Width: Width:  Width:  Width:  Width:	facilities  facilities  Tin PEN it is true, other to issuinistering of	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Dimension  X  X  X  X  X  X  X  X  X  X  X  X  X	eight:  Ons  ) ) ) ) ) ) ) ) ) ) ) we) acknow accept lial access to	vledge that billity which the above	Square ootage
Proposed Cons Proposed I Residentia Commerci Municipal	Proposition:  Use  If add truction:  Use  If all Use  If all Use  If all Use  If all Use	including a accuracy or this inform	Bunkhou Mobile H Addition Accessor Special U Condition Other: (e.	Structure  ize (i.e. cab  with L  with a  with (2  with A  see w/ ( see w/ case)  Alteration  y Building  y Building  see: (explain  anal Use: (explain  company of the with a  company	e (first spin, hun oft Porch 2nd) Por Deck 2nd) Deck 2nd) Deck 2ttached sanitary, nufacturion (explain g Addition) explain)	Propose structure on ting shack, e  ck d Garage ed date) ain) on/Alteration  STARTING CON- examined by me (and that it will be and that it will be an and that it will be and that it will be an another than anot	ngth: ngth: ed Struc propert ttc.)  struction solution (explain)	ture  y)  rs, or   iin)  N WITHO  B best of m  by Bayfield  nt to count	cooking &  UT A PERMIT  Y (our) knowle ( County in det y officials char	Width: Width:  Width:  Width:  Width:	facilities  facilities  Tin PEN it is true, other to issuinistering of	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	Dimension  X  X  X  X  X  X  X  X  X  X  X  X  X	eight:  Ons  ) ) ) ) ) ) ) ) ) ) ) we) acknow accept lial access to	vledge that billity which the above	Square ootage

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit <u>85350</u> Lenawee

Copy of Tax Statement If you recently purchased the property send your Recorded Deed

Attach

Date \_

(See Note below)

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1)Show Location of: **Proposed Construction** 

(2)Show / Indicate: North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)Show:

(6)

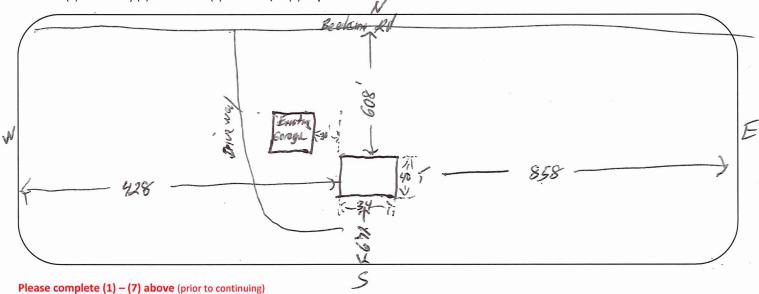
(3)Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)

(5) Show: Show any (\*): All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

Show any (\*): (7)

(\*) Wetlands; or (\*) Slopes over 20%



(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Setback Measureme	nts		Description	Setback Measurements	
Setback from the <b>Centerline of Platted Road</b>		Feet		Setback from the <b>Lake</b> (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way	608	Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	608	Feet				
Setback from the <b>South</b> Lot Line	672	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	428	Feet		20% Slope Area on the property	☐ Yes	.K No
Setback from the <b>East</b> Lot Line	828	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank		Feet		Setback to Well		Feet
Setback to <b>Drain Field</b>		Feet				
Setback to <b>Privy</b> (Portable, Composting)						

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:					
Permit Denied (Date):	Reason for Denial:								
Permit #: 22-0175	Permit Date: 7-	1-28-2022							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes  (Deed of  Yes (Fused/C		Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached ☐ Yes ☐ No ☐ Yes ☐ No					
Granted by Variance (B.O.A.)  ☐ Yes 🔼 No Case #:		Previously Granted by  Ves No	/ Variance (B.O.A.) Case	#:					
Was Parcel Legally Created Was Proposed Building Site Delineated  ▼Yes  Yes	No	Were Property Lines Represented by Owner  Was Property Surveyed  Yes  Yes							
Inspection Record: (roposed Structure staked	of rebal			Zoning District (A-L) Lakes Classification ( )					
Date of Inspection: 1-75-2022	Inspected by: 5m			Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attached? Tes No-(If No they need to be attached.)  To meet all set backs, including earls and over hangs. No plumbing permitted.  No bedrooms/inting quarters permitted. For personal storage only. Town (State 1 DNR permits may be needed.)									
Signature of Inspector: Quice Minispe	ans			Date of Approval: 7-70-7072					
Hold For Sanitary:  Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:						

T.IEHI IIIV	estigation .	
Date: 1-19-72	Arrive: 8:55	Depart 9:05
Landowner. Schultz, Randolph	Photos taken:	No (No
Project Location: 15245 Beeksma Rd	Persons Present	an
Waterway:  PIN#*Attach Real Estate Inquiry*  Paid \$ Receipt #	Purpose of visif: ZP Onsite Sanitary Floodplain Boathouse Averaging Other:	SAP Wetland Delineation OHWM Complaint Walkout
With 30 x 12 x x 1	x 30 x 1	lean to 12134 gwage noise

.

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0	175		ı	ssued	To: Ra	ndol	ph Schultz							
Location:					1/4	Section	21	Township	50	N.	Range	7	W.	Town of	Clover
Gov't Lot			L	ot (	55	Blo	ock	Sul	odivisio	n				CSM#	

**Residential Structure in Ag-1 zoning district** 

For: Accessory: [ 1- Story ]; Garage (40' x 34') = 1360 sq. ft. ] Height of 18'

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): Not for Human Habitation or Sleeping Purposes. If Pressurized water enters structure a sanitary permit is required prior. Must meet and maintain setbacks including eaves and overhangs. For personal storage only. Town/State/DNR permits may be required.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other negatives or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction work or land use has not begun.	_
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.	

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

# Authorized Issuing Official July 28, 2022

Date

Erica Meulemans, AZA

### SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: layfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

### APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

JUN 16 2022

Bayfield Co.

Permit #: 25	3-0164 (
Date: 7	- 27-2022
Amount Paid:	875 7-14-22 ResAdd +II4
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

☐ Relocate (existing bldg)

Run a Business on

Property

Address to send permit

Checks are made p	ayable to: Bayfield County Zoning	Department.	Planting and Zoning A	Marie)						
DO NOT START CO	NSTRUCTION <u>UNTIL ALL PERMITS</u>	HAVE BEEN ISSUED TO	APPLICANT. Origin	al Application M	<u>1UST</u> be submitt	ed FILL OUT IN	INK (NO I	PENCIL)		
TYPE OF PERMIT F	REQUESTED - LAND	USE SANITAI	RY PRIVY C	ONDITIONAL US	E SPECIAL US	SE B.O.A.	OTHER	14/4/57/20/4/57		
Owner's Name:			Address:	, , , , ,	ty/State/Zip:		Telephon	ie:		
DAVIDE	SANDRA COA	TES 840	165 Lenawe	e Rd H	evb slev.	WI 54844				
Address of Propert		City	y/State/Zip:		3. " "	11. 0 10 14	- 30	158		
84009		d	Herbsten	WI 54	844		Cell Phon	e:		
Email: (print clearly) Coates. SI@gmail.com										
Ontractor:										
1.C. Carpe	intry Adam Camo		7743471	Plumber:			Plumber	Phone:		
	(Person Signing Application on behalf			Agent Mailing Ad	d /:	/ >				
Owner(s))	( area of mig Application on Bellan	Agent	none.	Agent Mailing Ad	dress (include City/S	tate/Zip):	A STATE OF THE PARTY OF THE PAR	Authorization		
		Tax	c ID#					(for Agent)		
PROJECT LOCATION	egal Description: (Use Tax Sta	tement)	201/0			Recorded Document	t: (Showing Ow	nership)		
LOCATION			27647				•			
1/4,	1/4 Gov't Lot		Vol & Page   CSM Do		Block #	Subdivision:				
		1 2013	12-16 5703	570						
Section 78	, Township 58 N, Rang	ge 7 W	Town of:	· · · · ·		Lot Size	Acreas	76		
Section	_ , Township IV, Kan	5e W	Cle	rev			Acreag	5		
	☐ Is Property/Land within 3	On foot of Pivor Str.	00m /: 11.	Distance Co						
	Creek or Landward side of F		yescontinue ->	Distance Struc	ture is from Shore	1	Property odplain	Are Wetlands		
☐ Shoreland —						70	ne?	Present?		
	Is Property/Land within 1			Distance Struc	ture is from Shore		Yes	□ Yes		
AVAILE NO		117	yescontinue ->			feet 📈	No	No		
Non-					1.51					
Shoreland										
Value at Time			Total Exercise Average A							
of Completion				Total # of		What Type of		Type of		
* include	Project	Project	Project	bedrooms		/Sanitary System		Water		
donated time		# of Stories	Foundation	on		n the property <u>or</u>		on		
& material			E-57-	property	Will b	e on the propert	y?	property		
	New Construction	☐ 1-Story	☐ Basement	<b>1</b>	☐ Municipal/0	City		☐ City		
	Addition/Alteration	☐ 1-Story +	Faundation	4 0		ary Specify Type:				
, (	- Addition/Aiteration	Loft	☐ Foundation	2				₩well		
10.000	□ <b>C</b> i				Sanitary (Fy	ists) Specify Type:		,		
- Wildow	□ Conversion	☐ 2-Story	□ Slab	□ 3	callical y (Ex	Joes, Specify Type.	7,001			

		teration or business is being applied for)  Length: 36' Width: 72	Height:	20'
Proposed Construction:	(overa	all dimensions) & Your Length: B' Width: 20	Height:	10'
		Seck		
Proposed Use	1	Proposed Structure	Dimensions	Square Footage
-		Principal Structure (first structure on property)	( X )	
/		Residence (i.e. cabin, hunting shack, etc.)	( X )	
Residential Use		with Loft	( X )	
/ Indiana osc		with a Porch	( X - )	
		with (2 <sup>nd</sup> ) Porch	( x )	
	1.0	with a Deck	( x )	Υ
□ Commercial Use		with (2 <sup>nd</sup> ) Deck	( x )	,
= commercial osc		with Attached Garage	( X )	4 . 7
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	( X )	
		Mobile Home (manufactured date)	( X )	
☐ Municipal Use	X	Addition/Alteration (explain) Deck w/Roof overhana	(26×81)	1605051
		Accessory Building (explain)	( X )	160597
		Accessory Building Addition/Alteration (explain)	( X )	
		Special Use: (explain)	( x )	
		Conditional Use: (explain)	( x )	
100 m 1 /2/4 - 1 - 1		Other: (explain)	/ V )	

Use

☐ Year Round

□. None

	L	Other: (explain)	ANY	(	X	)	1 Trong
		FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL	DECLIET IN DENIALT	FIEC			
I (we) declare that this application (	including ar	y accompanying information) has been examined by me (us) and to the best of my (our) knowledge an	nd haliaf it is true some		complete. I (we	e) acknowler	dge that I (we) am
(are) responsible for the detail and a	accuracy of	all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determini atign I (we) am (are) providing in or with this application. I (we) consent to county officials charged wi	ing whather to iccue a	marmait !	I fore \ formale	11 - 1 - 111	
property at any reasonable time for	the purpos	of inspection.	itii adiiiiiiisteriiig coun	ity oraina	ances to have a	iccess to the	above described
Owner(s):	47	Mahrallates	in Aspelity (	Da	ate /0-	11-	2027
(If there are Multiple Owner	re lietad	on the Dood All Ourses must sign on letter /o - 5 - the in the		-	100		a con

ers must sign or letter(s) of authorization must accompany this application) Authorized Agent:

(See Note below) Date

□ Privy (Pit) or Vaulted (min 200 gallon)

☐ Portable (w/service contract)

☐ Compost Toilet

□ None

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Attach

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1) Show / Indicate:

**Proposed Construction** 

(2)

North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)

(3)Show Location of (\*):

Show:

(5) Show: Show any (\*): (6)

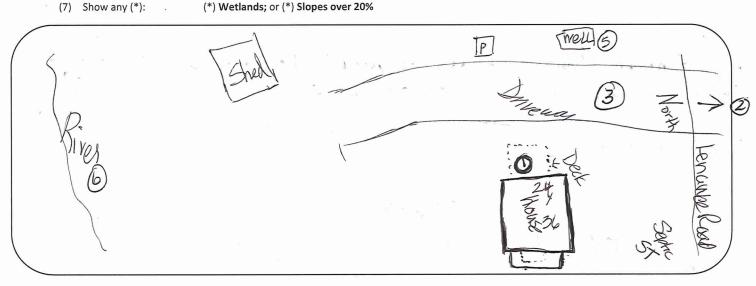
(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(\*) Wetlands; or (\*) Slopes over 20% Show any (\*):



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

#### (8) Setbacks: (measured to the closest point)

Description	Setback Measureme			Description	Setb Measure	
Setback from the Centerline of Platted Road	65	Feet		Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way		Feet	110	Setback from the River, Stream, Creek	410	Feet
				Setback from the Bank or Bluff		Feet
Setback from the <b>North</b> Lot Line	1	Feet				
Setback from the <b>South</b> Lot Line	.310	Feet	III.	Setback from Wetland		Feet
Setback from the West Lot Line	220	Feet		20% Slope Area on the property	☐ Yes	□ No
Setback from the East Lot Line	310	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	.35	Feet		Setback to Well	110	Feet
Setback to <b>Drain Field</b>		Feet			7-	,
Setback to Privy (Portable, Composting)		Feet				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be narked by a licensed surveyor at the owner's expense.

### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	1	# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:		To all the same					
Permit #: 88 - 0164	Permit Date: 7-	27-202	2					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Recor	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes No ☐ Yes No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No				
Granted by Variance (B.O.A.)  ☐ Yes ☑ No Case #:		Previously Granted by  Yes No	y Variance (B.O.A.) Case	e #:				
Was Parcel Legally Created Was Proposed Building Site Delineated  Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed  Yes U Yes						
Inspection Record: Isoposed deck was started				Zoning District ( A · \ ) Lakes Classification ( )				
Date of Inspection: 1-15-2027	Inspected by:	M		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Atta	ched?	No they need to be atta	ached.)	and the second				
To meet all setbacks, includi	ng eaves an	a overnance	15. 200 Plume	ing permission.				
To meet all setbacks, including eaves and overnangs. No plumbing permitted.  No bedrooms/liking quarters permitted. Town/State/DNR permits may be required.								
Signature of Inspector: Frila Malynn	ars			Date of Approval: 1-18-2027				
Hold For Sanitary:  Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:					

### Real Estate Bayfield County Tax Record

**Today's Date:** 6/11/2022

Tax Records: 2021 2020 2019 2018

Sec		
15.6		
10000		

### **Property Identification**

Tax ID:	37647
PIN:	04-014-2-50-07-28-2 01-000-22000
Legacy PIN:	
Map ID:	

2021 Ownership	Billing Address
DAVID L & SANDRA L COATES	DAVID L & SANDRA L COATES
	84005 LENAWEE RD HERBSTER WI 54844



### 2021 Property Values

2,400
0
2,000
0,400
,900
0
1,100
9,800



### 2021 Levy & Tax Information

Aggregate Ratio:	0.97899
Mill Rate:	0.015753256
School Credit:	133.15



### Specials

2021 Tax Bill	Status:	Paid In Full
	-	Management of the Control of the Con

LISTING FOR TAX YEAR: 2021

	Due	Paid	Balance
Gross Real Estate	1,116.90		
First Dollar Credit	- 75.00		
Lottery Credit	- 0.00		
Real Estate	1,041.90	1,041.90	0.00
Special Assessments	0.00	0.00	0.00
Special Charges	0.00	0.00	0.00
Delinquent Utilities	0.00	0.00	0.00
Private Forest	0.00	0.00	0.00
Managed Forest Open	0.00	0.00	0.00
Managed Forest Closed	0.00	0.00	0.00
Amount Due:			0.00



### Installments

Installment #	Due	Payable To	Amount
Installment 1	1/31/2022	Municipality	520.95
Installment 2	7/31/2022	County	520.95
		Total ->	1,041.90



### Payments

Receipt #	Posted	Paid By	Amount
22014-00485	1/27/2022	COATES, DAVID	1,041.90

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY - Existing (# 18-113S)
SIGN SPECIAL CONDITIONAL BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

22-0164 **David & Sandra Coates** Issued To: No. Location: Town of **Clover** 28 Township **50** Range **7**  $\frac{1}{4}$  of ½ Section N. 2013 Gov't Lot Lot Block Subdivision CSM# IN V.12 P.16 IN DOC 2017R-570570

Residential Structure in Ag-1 zoning district

For: Add/Alt: Deck w/ roof overhang (20' x 8') = 160 sq. ft. Height of 10'

Condition(s): A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction (if applicable). Meet and maintain setbacks as approved including eaves and overhangs. Build as proposed.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Erica Meulemans, AZA

**Authorized Issuing Official** 

July 27, 2022

Date